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UTILITY
PATENT APPLICATION
TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	M-12305-1D US
First Named Inventor or Application Identifier	Alexander Tzalenchuk et al.
Title	Finger SQUID Qubit Device
Express Mail Label No.	EL 884 815 888 US

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents

ADDRESS TO: Commissioner for Patents
Box Patent Application
Washington, D.C. 202311. ☒ Fee Transmittal Form - *see page 2 of this form.*
(Submit an original, and a duplicate for fee processing)

2. Application:

☒ Specification: (preferred arrangement set forth below)Descriptive title of the Invention,
Cross References to Related Applications,
Reference to Microfiche Appendix,
Background of the Invention,
Brief Summary of the Invention,
Brief Description of the Drawings, and
Detailed Description (all totaling 38 pages)
Appendix(es) _____, & _____ (_____ pages)☒ Claim(s) 6 pages☒ Abstract of the Disclosure 1 page3. ☒ Drawing(s) (35 USC 113) [Total Sheets 16]4. Oath or Declaration ☒ unsigned [Total Pages 3]a. ☐ Newly executed (original or copy)b. ☒ Copy from prior application (37 CFR §1.63(d))
(for continuation/divisional with Box 17 completed)c. ☐ DELETION OF INVENTOR(S)Signed statement attached deleting inventor(s) named in the prior application,
see 37 CFR 1.63(d)(2) and 1.33(b)5. ☒ Incorporation By Reference (useable if Box 4b is checked)The entire disclosure of the prior application, from
which a copy of the oath or declaration is supplied
under Box 4b, is considered as being part of the
disclosure of the accompanying application and is
hereby incorporated by reference therein.6. ☐ Microfiche Computer Program Appendix
consisting of _____ pages of microfiche containing _____
frames on each page in accompanying envelope.7. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)a. ☐ Computer Readable Copyb. ☐ Paper Copy (identical to computer copy)c. ☐ Statement verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

8. ☐ Assignment Papers (cover sheet & documents) _____ pages9. ☐ 37 CFR §3.73(b) Statement ☒ Power of Attorney
(combined when there is an _____ with Patent Declaration
Assignee) above.)10. ☐ English Translation Document (if applicable)11. ☐ Information Disclosure ☐ _____ Copies of IDS
Statement (IDS) & ☐ PTO-1449 Citations/References12. ☐ Preliminary Amendment _____ pages13. ☒ Return Receipt Postcard (MPEP 503)
(should be specifically itemized)

14. Small Entity Status

☐ Small Entity Statement Enclosed _____ pages☐ Statement filed in prior application; and
status still proper and desired☐ Is no longer claimed.15. ☐ Certified Copy of Priority Document(s)
(if foreign priority is claimed)16. ☐ Other:☐ Copy of Petition for Extension of Time filed in parent appln.;☐

17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information and a preliminary amendment:

☐ Continuation ☒ Divisional of prior application, Attorney Docket No. M-12305 USFiled on December 17, 2001, entitled: FINGER SQUID QUBIT DEVICE.

PRIOR APPLICATION INFORMATION: Examiner _____ Group Art Unit _____

18. CORRESPONDENCE ADDRESS

☐ Customer Number or Bar Code Labelor ☒ Correspondence address below

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JC675 U.S. PTO

10/025818

12/18/01

19. Fee calculations.

CLAIMS (Number Filed)	(1) FOR	(2)		(3) NUMBER EXTRA		(4) RATE		(5) CALCULATIONS
35	TOTAL CLAIMS (37 CFR 1.16(c))	-20	=	15	X	\$9	=	\$ 135.00
10	INDEPENDENT CLAIMS (37 CFR 1.16(b))	-3	=	7	X	\$42	=	\$ 294.00
<input type="checkbox"/>	MULTIPLE DEPENDENT CLAIMS (if applicable) (37 CFR 1.18(d))				+	\$280.00	=	
	BASIC FEE (37 CFR 1.16(a))						=	\$ 370.00
	Total of above Calculations						=	\$ 799.00
	Reduction by 50% for filing by small entity (Note 31 CFR 1.9, 1.27, 1.28).						=	
	TOTAL						=	\$ 799.00

20. **FEES:** The Commissioner is hereby authorized to credit overpayments or charge the following fees to Deposit Account No.:

- a. ☐ Fees required under 37 CFR 1.16. (U.S. Application Filing Fees)
b. ☒ Fees required under 37 CFR 1.17. (Conditional Extension of Time Fees)
c. ☐ Fees required under 37 CFR 1.18. (Patent Issue Fees)

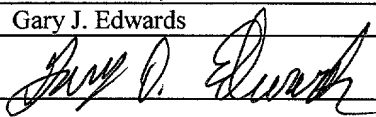
21. ☐ Other: _____

NOTE: The prior application's correspondence address will carry over to this UPA UNLESS a new correspondence address is provided below.

22. NEW CORRESPONDENCE ADDRESS

<input type="checkbox"/> Customer Number or Bar Code Label		<input type="checkbox"/> New correspondence address below	
NAME			
ADDRESS			
CITY	STATE	ZIP CODE	
COUNTRY	TELEPHONE	FAX	

23. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

Skjerven Morrill MacPherson LLP 25 Metro Drive, Suite 700 San Jose, CA 95110 Tel. (408) 453-9200 Fax. (408) 453-7979	
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Signature	
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